

Senate

General Assembly

File No. 528

February Session, 2002

Substitute Senate Bill No. 140

Senate, April 17, 2002

The Committee on Appropriations reported through SEN. CRISCO of the 17th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING ADMISSIONS TO NURSING HOMES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. (NEW) (Effective October 1, 2002) The medical director of a
- 2 nursing home or rest home shall have the results of a person's Mental
- 3 Illness/Mental Retardation screening before admitting such person as
- 4 a patient in such home.

This act shall take effect as follows:	
Section 1	October 1, 2002

Statement of Legislative Commissioners:

Section 1 was rephrased for clarity.

APP Joint Favorable Subst.

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

This bill specifies that the medical director of a nursing home must have the results of a Mental Illness / Mental Retardation screening prior to admitting a person to the home. This is not anticipated to result in any fiscal impact to the state.

OLR Bill Analysis

sSB 140

AN ACT CONCERNING ADMISSIONS TO NURSING HOMES

SUMMARY:

This bill requires a medical director of a nursing or rest home to have the results of a patient's mental illness/mental retardation screening before admitting him.

EFFECTIVE DATE: October 1, 2002

BACKGROUND

Types of Nursing Homes

The state licenses two types of nursing homes: (1) "chronic and convalescent care nursing homes" (CCNHs), which provide skilled nursing home care and (2) rest homes with nursing supervision (RHNSs), which provide intermediate nursing care.

Licensed residential care homes (formerly known as homes for the aged) also provide limited help with activities of daily living, but they do not provide nursing services and are not considered nursing homes.

For licensing purposes, state law defines "rest home" along with "residential care home" and "nursing home" as an establishment that furnishes, in single or multiple facilities, food and shelter to two or more persons unrelated to the proprietor and, in addition, provides services that meet a need beyond the basic provisions of food, shelter, and laundry. It is not entirely clear, but the bill's references to "rest home" probably mean "rest home with nursing supervision."

Mental Illness/Mental Retardation Preadmission Screening

Connecticut law prohibits nursing homes (CCNHs and RHNSs) from admitting anyone, irrespective of the payment source, who has not undergone a preadmission screening process for mental illness and

mental retardation, based on an independent physical and mental evaluation, that determines whether the person has mental illness or mental retardation and, if so, whether he requires nursing facility services or specialized services. The law also prohibits nursing homes that violate the preadmission screening requirement from receiving payment from any source for their services to that individual.

Federal regulations also require preadmission screenings for mental illness and mental retardation for anyone entering a Medicaid-certified nursing home (most homes are Medicaid-certified) (42 C.F.R. § 483.100ff).

Legislative History

On April 3, the Senate referred the bill (file 173) to the Appropriations Committee, which deleted everything in the bill except for this provision and reported the substitute favorably on April 9. The original file also required the nursing home or rest home medical director to deny any patient admission if he determines that the facility does not have sufficient trained staff and the proper treatment protocols to meet the patient's needs. It also prohibited any hospital, state hospital, community mental health center, or public or private mental health facility from discharging a patient who has a psychiatric diagnosis to any nursing home (chronic and convalescent nursing home or rest home with nursing supervision), unless the facility has a separate unit with an adequate level of trained personnel to care for the patient's psychiatric needs.

COMMITTEE ACTION

Select Committee on Aging

Joint Favorable Substitute Change of Reference Yea 12 Nay 0

Public Health Committee

Joint Favorable Substitute Yea 25 Nay 0

Appropriations Committee

Joint Favorable Substitute Yea 50 Nay 1